

Summary of the Accrediting Authority Committee Meeting February 5, 1997

The National Environmental Laboratory Accreditation Conference (NELAC) Accrediting Authority Committee met from 9:00 am to 12:00 p.m. Eastern Standard Time on Wednesday, February 5, 1997. The meeting was led by the Committee chair, Mr. John Anderson, Division Manager of the State of Illinois Environmental Protection Agency (IL-EPA). A list of action items is given in Attachment A. A list of Committee members/invited guests is given in Attachment B. A copy of the meeting's agenda is given in Attachment C.

INTRODUCTION

Mr. Anderson welcomed all participants and encouraged each to participate in discussions of the meeting. He presented an overview of the meeting of the Accrediting Authority Committee held on February 4, 1997, he stated that the objective of the Committee was to have Chapter 6 ready for voting at the Third NELAC Annual Meeting, to be held July 28-31, 1997, in Dallas, TX.

The purpose of the meeting was to resolve issues raised in discussions during yesterday's meeting of the Accrediting Authority Committee. This was an extra meeting of the Committee in addition to the meetings published in the NELAC III schedule. An announcement of this meeting was posted on the NELAC bulletin board adjacent to the registration area. The following items were discussed:

- Accreditation of government laboratories -- Mr. Anderson stated that he had been informed that the U. S. Environmental Protection Agency (USEPA) will continue to accredit one environmental laboratory in each state when the National Environmental Laboratory Accreditation Program (NELAP) is implemented.
- Conflict-of-interest issues within an accrediting authority -- The Committee and participants discussed specific conflict-of-interest (COI) issues relating to accreditation of state laboratories. Of special concern are laboratories in the same Agency as the accrediting authority.
- Performance evaluation for assessors of an accrediting authority -- The Committee and participants discussed the NELAP assessment team's review of the quality system requirements of an accrediting authority with respect to employee performance evaluations.
- Qualifications of the NELAP assessment team members -- The Committee and participants discussed credentials for individual members of the NELAP assessment team versus qualifications for the entire team.

- Interim recognition and reciprocity -- Concerns were raised about allowing accrediting authorities holding only interim NELAP recognition to participate in laboratory accreditation through reciprocity with other NELAP-recognized accrediting authorities.

ACCREDITATION OF GOVERNMENT LABORATORIES

Mr. Anderson stated that he had received updated information from the USEPA indicating that they will continue to accredit laboratories when NELAP is implemented. At this time, the USEPA is planning to continue accrediting one environmental laboratory in each state. This plan will help address the COI issues for laboratories within a governmental agency that also functions as an accrediting authority. Ms. Maude Bullock of the Department of the Navy indicated that accreditation by an agency other than the Department of Defense (DOD) would not be acceptable for the DOD because of the mission-readiness function provided by DOD laboratories. She said that within the DOD there is a division in organizational structure between the quality assurance officer (QAO) and operations manager, therefore COI issues were not expected to arise. Ms. Bullock suggested that organizational COI be defined in Section 6.2(j) and proposed to include the terminology “not directly reporting to” as a part of this definition. Mr. Jack Farrell suggested that this section include wording consistent with ISO Guide 58, Section 4.2 (i): “together with senior executives and staff be free of ... issues that may impact the accreditation process. The assessment team will evaluate COI issues for a participating accrediting authority.” The Committee concurred that COI issues need to be addressed in Chapter 6.

The Committee considered that Chapter 6 should provide language consistent with the requirements of ISO Guide 58 against which assessors can review an accrediting authority’s Quality System. Such language might require accrediting authorities to develop Policy and Procedures that include the following elements:

- a statement in Policy and Procedures that COI is not acceptable;
- a delineation within the organizational structure so that the QAO and operations managers will not report to the same individual; and
- an avenue of review when further consideration is necessary.

Ms. Bullock suggested that Section 6.2(j) be rewritten as follows: “Governmental departments and agencies which operate laboratories that are organizational units within the accrediting authority shall develop Policy and Procedures to eliminate actual and/or potential conflict-of-interests, as required in Section 6.3.3.” The Committee agreed to revise the section as proposed by Ms. Bullock, but recognized that Sections 6.2(f) through (j) may need some rework in light of the fact that the USEPA will continue to accredit state laboratories.

Section 6.3.3 -- Application Technical Review by a NELAP Assessment Team (d)(6)

The Committee extensively discussed performance evaluations of an accrediting authority’s assessors with respect to the interpretation of terminology in this section. The section was written

to address nebulous requirements in ISO Guide 58 regarding how evaluating the performance of an assessor was to be carried out. In addition, the intent of this section is to ensure that each accrediting authority has a performance evaluation program in place.

The Committee considered that every accrediting authority should have a quality assurance (QA) program in place specifying the operating principles of the organization. Because the NELAP assessment team will evaluate the QA program of each accrediting authority during the on-site assessment, a suggestion was made to utilize a checklist for this evaluation. Additional suggestions included replacing the term “has the same” with “meets or exceeds,” and revising the section to read: “has a system in place to evaluate assessor performance.” However, both of these suggestions circumvented the original intention of the section, which was to ensure that the performance of an assessor was evaluated by the same method used to evaluate the performance of all other employees in the accrediting authority. The Committee continued to discuss this issue in light of requirements in Chapter 3, On-Site Assessment, because terminology in the existing Section 6.3.3(d)(6) did not address the competence of assessors. The competence and duties of on-site laboratory assessors are set forth in Chapter 3. Mr. Anderson reminded the Committee that the NELAC chapters are a standard-setting document, and usage of detailed language may preclude a state’s compliance with a standard that differs from that state’s policies, regulations or laws (e.g., performance appraisal systems). The Committee agreed to revise the section using wording proposed by Maude Bullock as follows: “has a system in place to evaluate assessor performance that is consistent with the organizational employee evaluation program and demonstrates compliance with Section 3, On-Site Assessment.”

(d)(8)

The Committee concurred that the term “alleviate” should be changed to “eliminate.” The following additional terminology was suggested: “... technical staff are free of any commercial, financial or other pressures that influence the results of the accreditation process are subject...” to be consistent with ISO Guide 58, Section (i). This section will be revised accordingly.

(e)

As it is currently written, Chapter 6 allows an accrediting authority with interim recognition to grant reciprocal agreements. The following suggestion (from Mr. W.G. Mills of Vermont) was made at the February 4, 1997, meeting of the Committee to restrict reciprocity when an accrediting authority holds only interim accreditation. Mr. Mills suggested limiting reciprocity to only those accrediting authorities that have received full recognition by NELAP (i.e., accrediting authorities that have successfully completed an on-site audit). Mr. Mill’s suggestion read as follows: “An accrediting authority granted interim recognition must have completed a successful on-site audit of its program prior to granting any reciprocal accreditations.” Mr. Mill’s concern is that an accrediting authority could be in the interim mode for several months and should be restricted during this period. It was estimated that an on-site audit might require about a week, plus scheduling lead time and report-writing time. Thus, it is conceivable that an accrediting authority could be on “interim” status for quite some time. NELAC is not considering “grandfathering” accrediting authorities or laboratories. Some States said (e.g., North Carolina) they will need to have NELAP in place before legislative action can be enacted (because the on-

site audit may identify deficiencies that will require corrective actions). On the other hand, other States may need to have legislation in place authorizing funding to pursue NELAP recognition. The Committee concurred that the question rested with the concerns of States for entering into reciprocal agreements with another State that has not satisfactorily completed the on-site audit.

To identify the consensus of States, Ms. Bullock volunteered to develop a cover letter and questionnaire to survey the States on the issue of granting reciprocity with interim recognition from NELAP. She said she will have a draft of the cover letter and questionnaire mailed to the Committee within a couple of weeks.

Section 6.7.1 -- NELAP Assessment Team

(d)

The Committee discussed this section relative to comments about qualifications for assessment team members from Ms. Jeanne Mourrain, NELAC Director. Several comments were voiced at the February 4th Committee meeting regarding the importance of administrative experience, that is, experience beyond that of assessing laboratories. Efforts were made to delineate qualifications that were important to each assessment team member as opposed to qualifications that should be embodied by the team. A Committee member suggested maintaining the terminology proposed by Dr. Jeff Flowers in the February 4, 1997, meeting of the Accrediting Authority Committee. The Committee concurred in that suggestion. (Refer to the minutes of the February 4th meeting for the exact wording adopted.)

CONCLUSION

Mr. Anderson concluded the meeting by thanking the Committee members and participants for helpful and lively discussions over the past two days, and for the valuable input for the revision of Chapter 6. Mr. Anderson indicated that he would work with Mr. Ted Coopwood, NELAC Executive Secretary, to schedule additional teleconferences so that the revisions of Chapter Six would be completed by May 1, 1997, and the chapter would be ready for voting at the Third NELAC Annual meeting in July 1997.

NEXT TELECONFERENCE

Mr. Anderson will inform the Committee of the dates of subsequent teleconferences as they are scheduled.

ACTION ITEMS
Accrediting Authority Committee Meeting
February 5, 1997

Item No.	Action	Date Completed
1	Mr. Anderson will revise Section 6.2(j) to read as follows: “Governmental departments and agencies which operate laboratories that are organizational units within an accrediting authority or have other institutional conflict-of-interests shall develop Policy and Procedures to eliminate actual and/or potential conflict-of-interest as required in Section 6.3.3(d)(8).	
2	Mr. Anderson will revise Section 6.3.3(d)(6) as follows: “has a system in place to evaluate assessor performance that is consistent with the organizational employee evaluation program and demonstrates compliance with Chapter 3, On-Site Assessment.	
3	Mr. Anderson will change the term “alleviate” to eliminate in Section 6.3.3(d)(8) and revise the section to define COI issues.	
4	Mr. Anderson will revise Section 6.7.1(d) to include the language adopted at the Committee’s February 4, 1997 meeting.	

ACTION ITEMS
Accrediting Authority Committee Meeting
February 5, 1997

Item No.	Action	Date Completed
5	Ms. Bullock will draft a survey of the States to assess their willingness to grant reciprocal agreements to an accrediting authority that has interim recognition from NELAP. She will develop, within a couple of weeks, a cover letter and a questionnaire for presentation at the next meeting of the Committee.	

LIST OF COMMITTEE MEMBERS/MEETING PARTICIPANTS
Accrediting Authority Committee Meeting
February 5, 1997

Name	Affiliation	Phone/Fax/E-mail
John Anderson	Illinois EPA, Division of Laboratories	Tel: 217-782-6455 Fax: 217-524-0944 E-mail: epa6103@epa.state.il.us
Maude Bullock	Department of the Navy	Tel: 703-602-1738 Fax: 703-602-5547 E-mail: bullockm@n4.opnav.navy.mil
Jack Farrell	Analytical Excellence, Inc.	Tel: 407-331-5040 Fax: 407-331-4025 E-mail: AEX@ix.netcom.com
Mary Ann Feige (Absent)	USEPA, Cincinnati	Tel: 513-569-7944 Fax: 513-569-7191 E-mail: feige.maryann@epamail.epa.gov
Jeff Flowers	Flowers Chemical Laboratories	Tel: 407-339-5984 Fax: 407-260-6110 E-mail: jeff@flowerslabs.com
Jim Meyer	NC EHNRR/DEM Chemistry Lab	Tel: 919-733-3906 Fax: 919-733-6241 E-mail:
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LIST OF COMMITTEE MEMBERS/MEETING PARTICIPANTS
Accrediting Authority Committee Meeting
February 5, 1997

Invited Guests:

Name	Affiliation	Phone/Fax/E-mail
Carol Madding (substituting for Mary Ann Feige)		
Jeri Long	Illinois EPA, Division of Laboratories (Assistant to the Chair)	Tel: 217-782-6455 Fax: 217-524-0944 E-mail: epa6110@epa.state.il.us

AGENDA
Accrediting Authority Committee Meeting
February 5, 1997

9:00 a.m. Eastern Standard Time

No formal agenda was developed in advance. The stated purpose of the meeting was to begin discussion of unresolved issues and suggested changes to Chapter 6 that were raised during the February 4, 1997, Committee meeting.